

Application Data Sheet**Application Information**

Application Type:: Regular
Subject Matter:: Utility
Suggested Classification::
Suggested Group Art Unit::
CD-ROM or CD-R?:: None
Number of CD disks::
Number of Copies of CDs::
Sequence Submission?:: None
Computer Readable Form (CRF):: No
Number of copies of CRF:: 0
Title:: AN ANALYSIS SYSTEM
Attorney Docket Number:: 1501-1259
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure::
Total Drawing Sheets:: 15
Small Entity?:: No
Latin Name::
Variety Denomination Name::
Petition Included?:: No
Petition Type::
Licensed US Gov't Agency::
Contract or Grant Numbers::
Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: SWEDEN
Status:: Full Capacity
Given Name:: STEFAN
Middle Name::
Family Name:: LINDBERG
Name Suffix::
City of Residence:: STRANGNAS
State or Province of
Residence::
Country of Residence:: SWEDEN
Street of Mailing SLANBARSSTIGEN 10
Address::
City of Mailing Address:: STRANGNAS
State or Province of Mailing Address::
Country of Mailing Address:: SWEDEN
Postal or Zip Code of Mailing Address:: S-645-43

Applicant Authority Type:: Inventor
Primary Citizenship Country:: SWEDEN
Status:: Full Capacity
Given Name:: HAKAN
Middle Name::
Family Name:: HEDLUND
Name Suffix::
City of Residence:: STRANGNAS
State or Province of
Residence::
Country of Residence:: SWEDEN
Street of Mailing TRANBARSSTIGEN 15 B
Address::
City of Mailing Address:: STRANGNAS

State or Province of Mailing Address::
Country of Mailing Address:: SWEDEN
Postal or Zip Code of Mailing Address:: S-645 43

Applicant Authority Type:: Inventor
Primary Citizenship Country:: SWEDEN
Status:: Full Capacity
Given Name:: JIM
Middle Name::
Family Name:: KUMMELSTAM
Name Suffix::
City of Residence:: STRANGNAS
State or Province of
Residence::
Country of Residence:: SWEDEN
Street of Mailing ELMAVAGEN 11
Address::
City of Mailing Address:: STRANGNAS
State or Province of Mailing Address::
Country of Mailing Address:: SWEDEN
Postal or Zip Code of Mailing Address:: S-645 92

Applicant Authority Type:: Inventor
Primary Citizenship Country:: SWEDEN
Status:: Full Capacity
Given Name:: JARL-OVE
Middle Name::
Family Name:: LINDBERG
Name Suffix::
City of Residence:: STRANGNAS
State or Province of
Residence::
Country of Residence:: SWEDEN
Street of Mailing UTSIKTSVAGEN 32

Address::

City of Mailing Address:: STRANGNAS

State or Province of Mailing Address::

Country of Mailing Address:: SWEDEN

Postal or Zip Code of Mailing Address:: S-645 42

Correspondence Information

Correspondence Customer 000466

Number::

Representative Information

Representative Customer	000466
Number::	

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/SE03/00088	1/20/03
PCT/SE03/00088	An application claiming the benefit under 35 USC 119 (e)	60/384,118	5/31/02

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
SWEDEN	0200147-7	1/18/02	Yes
SWEDEN	0200215-2	1/25/02	Yes

Assignment Information

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::